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| **Chief Nursing Officer & Clinical Director**  Fiona McQueen & Jason Leitch  **Interim Chief Medical Officer**  Gregor Smith  T: 0300 244 4000  E: scottish.ministers@gov.scot |  |
| NHS Scotland Directors of Nursing  NHS Scotland Medical Directors  NHS Scotland chairs and chief executives  By email |  |

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7 December 2020

Dear colleagues,

Thank you for your continued efforts in dealing with the continuing COVID-19 outbreak.

In common with colleagues across the health service, you will be preparing for Christmas and what this means for your patients, staff, visitors and communities. With that in mind, we wanted to let you know that we expect there to be no changes over the Christmas period to [national visiting guidance for hospitals](https://www.gov.scot/publications/coronavirus-covid-19-hospital-visiting-guidance/).

As is currently the case, hospital visiting restrictions relate to the level in which level a local authority has been placed on [the strategic framework](https://www.gov.scot/publications/coronavirus-covid-19-protection-levels/) (see Annex A). This will remain the case over the Christmas period, even on dates when general regulations on travel and gatherings will be suspended.

This is in recognition of the additional clinical vulnerability of hospital in-patients, and the desire to continue to manage infection prevention and control within our hospitals, but we wish also to emphasise the existing flexibility in the guidance.

We are aware that Christmas can be particularly isolating for patients and their loved ones, and we encourage you to be mindful of the need to apply the existing guidance with flexibility and compassion to ensure that where possible people can still see their loved ones.

It is important to note that in every level of the strategic framework, at a minimum essential visits will continue to take place. The regulations allow travel between tiers to visit someone in hospital for an essential visit. In every level we encourage a flexible and compassionate approach to visiting.

**Examples of essential visits include but are not limited to:**

* A birth partner supporting a woman during hospital visits
* For a person receiving end-of-life care – we expect this to be defined as flexibly and compassionately as possible, to support patients at the end of life spending meaningful time with their loved ones in their final days and weeks. You are reminded that there is no limit on the number of people who can visit a patient at end-of-life.
* to support someone with a mental health issue such as dementia, a learning disability or autism where not being present would cause the patient to be distressed
* to accompany a child in hospital.

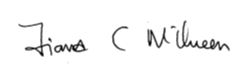
These examples are intended to be illustrative and not exhaustive. It is also important to note that what you judge, in discussion with a patient’s family and loved ones, to be an essential visit at Christmas may be different from at other times of the year.

As stated above, we encourage you to use the existing flexibility in the guidance to ensure that wherever possible patients are able to stay connected with and see the people who matter most to them, ensuring no one is unnecessarily isolated over the Christmas period.

We are aware that loved ones may want to bring cards or gifts to patients in hospital at Christmas. There are particular risks around items such as food or flowers and some wards will discourage these on the grounds that they present particular infection control challenges. It may, however, be possible to bring in cards or gifts to a patient’s room – providing these are kept to a minimum – and visitors should discuss this with ward staff when they call to arrange a visit.

As always, we support your teams to use their clinical judgment to meet the needs of individual patients and their loved ones.

Yours sincerely,

**Professor Fiona McQueen Professor Jason Leitch**

**Chief Nursing Officer National Clinical Director**



**Dr Gregor Smith**

**Interim Chief Medical Officer Annex A**

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| **Strategic Framework Tier** | Level Zero | Level One | Level Two | Level Three | Level Four |
| **Visiting** | Essential Visits  And  Two designated visitors at the same time observing physical distancing  *Or, if it is not possible to maintain physical distancing for two visitors at the same time:*  Two designated visitors each day, each one visiting separately | Essential Visits  And  Two designated visitors at the same time observing physical distancing  *Or, if it is not possible to maintain physical distancing for two visitors at the same time:*  Two designated visitors each day, each one visiting separately | Essential Visits  And  One designated visitor observing physical distancing | Essential Visits only (End of Life, birth partners, children, patients with mental health issues including dementia, learning disabilities, autism)  *And, if clinicians at hospital level judge it to be safe and appropriate:*  One designated visitor observing physical distancing | Essential Visits only (End of Life, birth partners, children, patients with mental health issues including dementia, learning disabilities, autism) |
| **Required** | Visitors must maintain physical distancing wherever possible  Visitors must wear face coverings;  Visitors must have access to hand hygiene facilities  Restricted movement to other areas of hospital unless of part of care for patient – i.e. birth partner attending scan, parent accompanying child or other similar situation | | | | |
| **Settings** | Hospitals/ wards with no COVID-19 outbreak.  Essential visits can still take place to COVID-19 areas (now known as red pathways). COVID-19 areas should remain at essential visitors only. | | | | |